



**InsureKidsNow.gov**  
Connecting Kids to Coverage

## Description of Dental Benefits for Children in Iowa

### Children's Dental Services

#### Preventive Services

	Is the service Covered?			Frequency	List any service-specific limitations
	Yes	Only with prior authorization	No		
<b>Cleanings</b>	X			1 x 6 months	
<b>Fluoride treatments (including fluoride varnishes)</b>	X			1 x 6 months	
<b>Sealants (list any tooth-specific limits)</b>	X				Primary and permanent molars through 18 years of age. Also allow on for persons over 18 years who have a physical or mental disability that impairs their ability to maintain adequate oral hygiene.
<b>Space maintainers</b>	X				Covered when premature loss of teeth would permit existing teeth to shift causing a handicapping malocclusion.



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### Diagnostic Services

	Is the service Covered?			Frequency	List any service-specific limitations	Recommended age of first visit?
	Yes	Only with prior authorization	No			
<b>Dental examinations</b>						
	X			1 x 6 months	Problem specific evaluations are also allowed when necessary for such things as dental emergencies, trauma, acute infections, etc.	1 year
<b>X-Rays</b>						
Bitewing	X			1 x year		
Full Mouth	X			1 x every 5 years	Allow in less than 5 years when necessary to evaluate development and detect anomalies, injuries and disease.	
Panoramic	X			1 x every 5 years	is a benefit if a full-mouth x-ray has not been performed within 5 consecutive years	



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### Treatment Services

	Is the service Covered?			Frequency	List any service-specific limitations	Criteria for coverage
	Yes	Only with prior authorization	No			
Fillings						
Silver amalgam	X					
Tooth colored composite	X					
Crowns/tooth caps						
Stainless steel crowns	X					
Metal (only) crowns	X					
Metal/porcelain crowns	X				once every five years and a benefit only if the tooth cannot be restored with a routine filling	
Porcelain (only) crowns	X				once every five years and a benefit only if the tooth cannot be restored with a routine filling	
Root Canals (endodontics)						
Root canals on baby teeth (pulpotomies)	X					
Root canals on permanent teeth	X					
Gum (periodontal) therapy						



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	Yes	Only with prior authorization	No			
Dentures						
Partial dentures	X				once every 5 consecutive years	
Complete dentures	X				once every 5 consecutive years	
Bridges	X				once every 5 consecutive years	
Orthodontics*						
Retainers (orthodontic)		X				



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	Yes	Only with prior authorization	No			
Braces		X				Covered only for the most severe handicapping malocclusions. Provider agreement allows one time full payment to the orthodontist at the beginning of treatment to ensure treatment is completed regardless of the child's continued Medicaid eligibility.
<b>Oral surgery</b>						
Simple extractions	X					
Surgical extractions	X					
Care of abscesses	X					



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	Yes	Only with prior authorization	No			
Cleft palate treatment			X			
Cancer treatment			X			
Treatment of fractures			X			
Biopsies	X					
<b>Treatment of jaw joint problems (TMJ)</b>						
			X			
<b>Emergency room services provided by a dentist</b>						
	X					
<b>Inpatient Hospital Services</b>						
			X			
<b>Anesthesia</b>						
General anesthesia	X				benefited when provided in conjunction with covered oral surgery and when billed by the operating dentist.	
Intravenous conscious sedation	X					
Non-intravenous conscious sedation			X			



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	Yes	Only with prior authorization	No			
Analgesia (nitrous oxide)			X			

\* When this information is posted on the Insure Kids Now website, we will include a special note for orthodontic services explaining that parents and caretakers should work with their child's orthodontist to ensure that the treatment and payment terms and conditions are clear at the outset of treatment (for example, what happens in the case of a child who becomes ineligible for Medicaid or CHIP while he or she is undergoing orthodontic treatment?).